

POSITION	ID NO.	DATE
CLASSIFIER	10	11-14-95
EXAMINER	428	11-19-95
TYPIST	SW	11-26
VERIFIER	290	4-31-95
CORPS CORR.		
SPEC. HAND	aj9	9-1-95
FILE MAINT.	445	11-27-95
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	
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17 50	=

Claim	Date
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Original	
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SYMBOLS

- ✓ - Rejected
- - Allowed
- (Through number) Canceled
- + - Restricted
- Non-restricted
- Interference
- A - Appeal
- O - Objected

(LEFT INSIDE)